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§1–223.

- (a) In this section, "controlled dangerous substance" has the meaning stated in \S 5–101 of the Criminal Law Article.
- (b) On treatment for pain, a health care provider, based on the clinical judgment of the health care provider, shall prescribe:
 - (1) The lowest effective dose of an opioid; and
- (2) A quantity that is no greater than the quantity needed for the expected duration of pain severe enough to require an opioid that is a controlled dangerous substance unless the opioid is prescribed to treat:
 - (i) A substance-related disorder;
 - (ii) Pain associated with a cancer diagnosis;
- (iii) Pain experienced while the patient is receiving end-of-life, hospice, or palliative care services; or
 - (iv) Chronic pain.
- (c) The dosage, quantity, and duration of an opioid prescribed under subsection (b) of this section shall be based on an evidence—based clinical guideline for prescribing controlled dangerous substances that is appropriate for:
 - (1) The health care service delivery setting for the patient;
 - (2) The type of health care services required by the patient; and
 - (3) The age and health status of the patient.
- (d) (1) When a patient is prescribed an opioid under subsection (b) of this section, the patient shall be advised of the benefits and risks associated with the opioid.
- (2) When a patient is co-prescribed a benzodiazepine with an opioid that is prescribed under subsection (b) of this section, the patient shall be advised of

the benefits and risks associated with the benzodiazepine and the co-prescription of the benzodiazepine.

(e) A violation of subsection (b) or (d) of this section is grounds for disciplinary action by the health occupations board that regulates the health care provider who commits the violation.

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